

Fill in this information to identify your case:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	EASTERN DISTRICT OF NEW YORK		
Case number (if known)	8:25-bk-70092		

☒ Check if this is an amended filing
Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets
Your assets
 Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)
- 1a. Copy line 55, Total real estate, from Schedule A/B..... \$ 370,000.00
- 1b. Copy line 62, Total personal property, from Schedule A/B..... \$ 23,487.00
- 1c. Copy line 63, Total of all property on Schedule A/B..... \$ 393,487.00

Part 2: Summarize Your Liabilities
Your liabilities
 Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)
- 2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D*... \$ 892,192.51
3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)
- 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F*..... \$ 0.00
- 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F*..... \$ 65,178.00

Your total liabilities \$ 957,370.51
Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)
- Copy your combined monthly income from line 12 of *Schedule I*..... \$ 5,397.64
5. **Schedule J: Your Expenses** (Official Form 106J)
- Copy your monthly expenses from line 22c of *Schedule J*..... \$ 5,806.00

Part 4: Answer These Questions for Administrative and Statistical Records

6. **Are you filing for bankruptcy under Chapters 7, 11, or 13?**
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. **What kind of debt do you have?**
- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

8. **From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 3,440.40

9. **Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

	Total claim
From Part 4 on <i>Schedule E/F</i>, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	RUTH ELIZABETH LITUMA VELIN		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF NEW YORK</u>			
Case number	<u>8:25-bk-70092</u>		

☐ Check if this is an amended filing
Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1

130 butler blvd

Street address, if available, or other description

ELMONT NY 11003

City State ZIP Code

County

What is the property? Check all that apply

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$740,000.00

Current value of the portion you own?
\$370,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>\$370,000.00**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No
☒ Yes

3.1 Make: Infinity
 Model: Qx80
 Year: 2017
 Approximate mileage: 80000
 Other information:

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property**
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$19,451.00\$19,451.00

3.2 Make: Nissan
 Model: Sentra
 Year: 2014
 Approximate mileage: 170000
 Other information:

Who has an interest in the property? Check one

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property**
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

\$3,668.00\$3,668.00**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$23,119.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☒ No
☐ Yes. Describe.....

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☒ No
☐ Yes. Describe.....

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☒ No
☐ Yes. Describe.....

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe.....

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No
☐ Yes. Describe.....

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☒ No
☐ Yes. Describe.....

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- ☒ No
☐ Yes. Describe.....

13. Non-farm animals*Examples:* Dogs, cats, birds, horses

- ☒ No
☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here\$0.00**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?**

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No
☐ Yes.....

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes.....

Institution name:

17.1.	Checking	<u>Jovia</u>	<u>\$200.00</u>
-------	----------	--------------	-----------------

17.2.	Checking	<u>Teachers</u>	<u>\$90.00</u>
-------	----------	-----------------	----------------

17.3.	Savings	<u>Jovia</u>	<u>\$5.00</u>
-------	---------	--------------	---------------

17.4.	Savings	<u>Teachers</u>	<u>\$5.00</u>
-------	---------	-----------------	---------------

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

- ☒ No
☐ Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☐ No
☒ Yes. List each account separately.

Type of account:
401(k)Institution name:
401k

\$68.00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes..... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

- ☒ No
☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

- ☒ No
☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- ☒ No
☐ Yes. Give specific information about them...

Money or property owed to you?**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

- ☒ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- ☒ No
☐ Yes. Give specific information.....

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- ☒ No
☐ Yes. Give specific information..

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- ☒ No
☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No
☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No
☐ Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

- ☒ No
☐ Yes. Describe each claim.....

35. Any financial assets you did not already list

- ☒ No
☐ Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....\$368.00**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.
☐ Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?***Examples:* Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here\$0.00**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2		<u>\$370,000.00</u>
56. Part 2: Total vehicles, line 5	<u>\$23,119.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$0.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$368.00</u>	
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>+ \$0.00</u>	
62. Total personal property. Add lines 56 through 61...	<u>\$23,487.00</u>	Copy personal property total <u>\$23,487.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<u>\$393,487.00</u>

Fill in this information to identify your case:

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF NEW YORK</u>		
Case number	<u>8:25-bk-70092</u>		
(if known)			

☐ Check if this is an amended filing
Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt**1. Which set of exemptions are you claiming?** Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
130 butler blvd, ELMONT, NY 11003 Line from Schedule A/B: 1.1	\$370,000.00	<input checked="" type="checkbox"/> \$152,513.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5206
2017 Infinity Qx80 80000 miles Line from Schedule A/B: 3.1	\$19,451.00	<input checked="" type="checkbox"/> \$8,594.49 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(8)
2014 Nissan Sentra 170000 miles Line from Schedule A/B: 3.2	\$3,668.00	<input checked="" type="checkbox"/> \$11,716.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(8)
Jovia Line from Schedule A/B: 17.1	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
Teachers Line from Schedule A/B: 17.2	\$90.00	<input checked="" type="checkbox"/> \$90.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Jovia Line from Schedule A/B: 17.3	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
Teachers Line from Schedule A/B: 17.4	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)
401k Line from Schedule A/B: 21.1	<u>\$68.00</u>	<input checked="" type="checkbox"/> <u>\$68.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NYCPLR § 5205(a)(9)

3. **Are you claiming a homestead exemption of more than \$189,050?**

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

☒ No☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?☐ No☐ Yes

Fill in this information to identify your case:

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF NEW YORK</u>		
Case number (if known)	<u>8:25-bk-70092</u>		

☐ Check if this is an amended filing
Official Form 106D**Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1	Freedom Mortgage Corporation Creditor's Name 11988 Exit 5 Pkwy Bldg Fishers, IN 46037-7939 Number, Street, City, State & Zip Code	Describe the property that secures the claim: <div style="border: 1px solid black; height: 40px; width: 250px; margin-top: 5px;"></div>	Unknown	\$0.00
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Date debt was incurred <u>2019-10-26</u>		Last 4 digits of account number <u>2258</u>		

2.2	Freedom Mortgage Corporation Creditor's Name 11988 Exit 5 Pkwy Bldg Fishers, IN 46037-7939 Number, Street, City, State & Zip Code	Describe the property that secures the claim: <div style="border: 1px solid black; height: 40px; width: 250px; margin-top: 5px;"></div>	Unknown	\$0.00
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____		
Date debt was incurred <u>2018-03-27</u>		Last 4 digits of account number <u>9128</u>		

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

First Name

Middle Name

Last Name

2.3 Rocket mortgage

Creditor's Name

Describe the property that secures the claim:130 butler blvd, ELMONT, NY 11003\$434,973.00\$740,000.00\$0.001050 Woodward ave
Detroit, MI 48226

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____**Who owes the debt?** Check one.☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ **Check if this claim relates to a community debt**Date debt was incurred 03/16/2018Last 4 digits of account number 8396**2.4** Rocket Mortgage

Creditor's Name

Describe the property that secures the claim:\$435,823.00\$0.00\$0.001050 Woodward Ave
Detroit, MI 48226-3573

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____**Who owes the debt?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt**Date debt was incurred 2019-10Last 4 digits of account number 8396**2.5** Santander

Creditor's Name

Describe the property that secures the claim:2017 Infinity Qx80 80000 miles\$10,856.51\$19,451.00\$0.00Po box 660633
Dallas, TX 75266

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____**Who owes the debt?** Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim relates to a community debt**Date debt was incurred 02/28/2022Last 4 digits of account number 5765

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

First Name

Middle Name

Last Name

2.6

Santander Consumer USA,
Inc

Creditor's Name

PO Box 961211Fort Worth, TX76161-0211

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

\$10,540.00\$0.00\$0.00

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Who owes the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debtDate debt was incurred 2021-02Last 4 digits of account number 1000

Add the dollar value of your entries in Column A on this page. Write that number here:

\$892,192.51

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$892,192.51**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

[] Name, Number, Street, City, State & Zip Code
Freedom Mortgage Corporation
 Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number _____

[] Name, Number, Street, City, State & Zip Code
Freedom Mortgage Corporation
 Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

On which line in Part 1 did you enter the creditor? 2.2

Last 4 digits of account number _____

[] Name, Number, Street, City, State & Zip Code
Rocket Mortgage
 Attn: Bankruptcy
1050 Woodward Ave
Detroit, MI 48226-3573

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number _____

[] Name, Number, Street, City, State & Zip Code
Santander Consumer USA, Inc
 Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161-0244

On which line in Part 1 did you enter the creditor? 2.6

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF NEW YORK</u>		
Case number	<u>8:25-bk-70092</u>		
(if known)			

☐ Check if this is an amended filing
Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	Affirm, Inc. Nonpriority Creditor's Name 650 California St Fl 12 San Francisco, CA 94108-2716 Number Street City State Zip Code	Last 4 digits of account number <u>8BZQ</u> When was the debt incurred? <u>2022-11</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$651.00

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known)

8:25-bk-70092

4.2	<u>Affirm, Inc.</u> Nonpriority Creditor's Name <u>650 California St</u> <u>FI 12</u> <u>San Francisco, CA 94108-2716</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>R9ZA</u> When was the debt incurred? <u>2021-12</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$156.00</u>
-----	---	---	-----------------

4.3	<u>Affirm, Inc.</u> Nonpriority Creditor's Name <u>650 California St</u> <u>FI 12</u> <u>San Francisco, CA 94108-2716</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>Z8B4</u> When was the debt incurred? <u>2023-08</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$97.00</u>
-----	---	---	----------------

4.4	<u>Affirm, Inc.</u> Nonpriority Creditor's Name <u>650 California St</u> <u>FI 12</u> <u>San Francisco, CA 94108-2716</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3JWE</u> When was the debt incurred? <u>2023-08</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$54.00</u>
-----	---	---	----------------

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

4.5	<u>Amex</u> Nonpriority Creditor's Name <u>PO Box 6789</u> <u>Sioux Falls, SD 57117-6789</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5678</u> When was the debt incurred? <u>2021-10</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$4,993.00</u>
-----	---	---	-------------------

4.6	<u>Bank of America</u> Nonpriority Creditor's Name <u>PO Box 982238</u> <u>El Paso, TX 79998-2238</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5506</u> When was the debt incurred? <u>2016-05</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$7,453.00</u>
-----	--	---	-------------------

4.7	<u>Bank of America</u> Nonpriority Creditor's Name <u>PO Box 982238</u> <u>El Paso, TX 79998-2238</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5811</u> When was the debt incurred? <u>2014-10</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$5,518.00</u>
-----	--	---	-------------------

4.8	<u>Bank of America</u> Nonpriority Creditor's Name <u>PO Box 45144</u> <u>Jacksonville, FL 32232-5144</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4098</u> When was the debt incurred? <u>2024-04</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>\$0.00</u>
-----	--	---	---------------

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

4.9	<u>Bank of America</u> Nonpriority Creditor's Name <u>PO Box 45144</u> <u>Jacksonville, FL 32232-5144</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>6466</u> <u>\$0.00</u> When was the debt incurred? <u>2022-12</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
-----	--	--

4.1 0	<u>Citi Card/Best Buy</u> Nonpriority Creditor's Name <u>PO Box 6497</u> <u>Sioux Falls, SD 57117-6497</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>3703</u> <u>\$4,422.00</u> When was the debt incurred? <u>2021-08</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
----------	---	--

4.1 1	<u>Citibank/the Home Depot</u> Nonpriority Creditor's Name <u>PO Box 6497</u> <u>Sioux Falls, SD 57117-6497</u> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>2481</u> <u>\$5,180.00</u> When was the debt incurred? <u>2018-07</u> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
----------	--	--

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-700924.1
2Comenity Bank/Victoria SecretLast 4 digits of account number 7100 \$218.00

Nonpriority Creditor's Name

PO Box 182789When was the debt incurred? 2021-05Columbus, OH 43218-2789

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify _____4.1
3Faculty Practice Group ELLast 4 digits of account number 9751 \$3,502.00

Nonpriority Creditor's Name

7901 Broadway, Room A1-9, Elmhurst

When was the debt incurred? _____

Elmhurst, NY 11373

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify _____4.1
4Long Island Integrative HealtLast 4 digits of account number 8414 \$4,200.00

Nonpriority Creditor's Name

Local 272 Welfare Foun, 220 East

When was the debt incurred? _____

23rd Street, Room 805New York, NY 10010

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify _____

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-700924.1
5Long Island Integrative Health

Nonpriority Creditor's Name

Local 272 Welfare Fund, 220 East
23rd Street, Room 805
New York, NY 10010

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 8414\$2,545.00**When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify _____

4.1
6Macy's/ DSNB

Nonpriority Creditor's Name

PO Box 6789
Sioux Falls, SD 57117-6789

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2147\$4,713.00**When was the debt incurred?** 2016-11**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify _____

4.1
7NYC Health + Hospitals

Nonpriority Creditor's Name

50 Water St.
New York, NY 10004

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ **Check if this claim is for a community debt**

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 0426\$50.00**When was the debt incurred?** _____**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify _____

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-700924.1
8Santander Bank NA

Nonpriority Creditor's Name

PO Box 12646Reading, PA 19612-2646

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number** 5080\$16,819.00**When was the debt incurred?** 2022-03**As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____4.1
9Td Bank/Raymour & Flanigan

Nonpriority Creditor's Name

Columbia, SC 29202

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number** 7951\$1,153.00**When was the debt incurred?** 2023-03**As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____4.2
0Wells Fargo Bank NA

Nonpriority Creditor's Name

PO Box 393Minneapolis, MN 55480-0393

Number Street City State Zip Code

Who incurred the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ **Check if this claim is for a community debt****Is the claim subject to offset?**☒ No☐ Yes**Last 4 digits of account number** 5616\$1,387.00**When was the debt incurred?** 2019-03**As of the date you file, the claim is:** Check all that apply☐ Contingent☐ Unliquidated☐ Disputed**Type of NONPRIORITY unsecured claim:**☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-700924.2
1**Wells Fargo Jewelry Advantage**Last 4 digits of account number 5751\$2,067.00

Nonpriority Creditor's Name

PO Box 393

Minneapolis, MN 55480-0393

When was the debt incurred? 2019-11

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Contingent☐ Debtor 2 only☐ Unliquidated☐ Debtor 1 and Debtor 2 only☐ Disputed☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☒ No☐ Debts to pension or profit-sharing plans, and other similar debts☐ Yes☒ Other. Specify _____**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Affirm, Inc.

Attn: Bankruptcy

650 California St

Fl 12

San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Affirm, Inc.

Attn: Bankruptcy

650 California St

Fl 12

San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Affirm, Inc.

Attn: Bankruptcy

650 California St

Fl 12

San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Affirm, Inc.

Attn: Bankruptcy

650 California St

Fl 12

San Francisco, CA 94108-2716

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.4 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Amex

Correspondence/Bankruptcy

PO Box 981540

El Paso, TX 79998-1540

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

Bank of America

Attn: Bankruptcy

4909 Savarese Cir

Tampa, FL 33634-2413

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

Name and Address
Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citi Card/Best Buy
Attn: Citicorp Cr Srvs Centralized
Bankruptcy
PO Box 790040
Saint Louis, MO 63179-0040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Citibank/the Home Depot
Citicorp Cr Srvs/Centralized
Bankruptcy
PO Box 790040
Saint Louis, MO 63179-0040

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.11 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Comenity Bank/Victoria Secret
Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218-2125

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.12 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Macy's/ DSNB
Attn: Bankruptcy
701 E 60th St N
Sioux Falls, SD 57104-0432

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Td Bank/Raymour & Flanigan
Attn: Bankruptcy
1701 Marlton Pike E
Cherry Hill, NJ 08003-2390

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Wells Fargo Bank NA
Attn: Bankruptcy
1 Home Campus
MAC X2303-01A FL 3
Des Moines, IA 50328-0001

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.20 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address
Wells Fargo Jewelry Advantage
Attn: Bankruptcy

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.21 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092PO Box 10438
Des Moines, IA 50306-0438

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a.	\$ 0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total claims from Part 2	6f. Student loans	6f.	\$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 65,178.00
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 65,178.00

Fill in this information to identify your case:

Debtor 1	<u>RUTH ELIZABETH LITUMA VELIN</u>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>EASTERN DISTRICT OF NEW YORK</u>		
Case number (if known)	<u>8:25-bk-70092</u>		

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Rocket mortgage	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: 130 butler blvd, ELMONT, NY 11003		
Creditor's name: Santander	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: 2017 Infinity Qx80 80000 miles		

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092

Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased Property:	<input type="checkbox"/> Yes

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X _____
 RUTH ELIZABETH LITUMA VELIN
 Signature of Debtor 1

X _____
 Signature of Debtor 2

Date _____

Date _____

Fill in this information to identify your case:

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Eastern District of New York

Case number 8:25-bk-70092
(if known)

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☒ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☒ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>3,440.40</u>	\$ <u>0.00</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm		
	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property		
	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
7. Interest, dividends, and royalties	\$ <u>0.00</u>	\$ <u>0.00</u>

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse8. **Unemployment compensation**\$ 0.00\$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you\$ 0.00For your spouse.....\$ 0.00

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00\$ 0.00

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below..

\$ 0.00\$ 0.00\$ 0.00\$ 0.00

Total amounts from separate pages, if any.

+ \$ 0.00\$ 0.00

11. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 3,440.40+ \$ 0.00= \$ 3,440.40Total current monthly
income**Part 2: Determine Whether the Means Test Applies to You**12. **Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11 **Copy line 11 here=>**\$ 3,440.40

Multiply by 12 (the number of months in a year)

x 12

12b. The result is your annual income for this part of the form

12b. \$ 41,284.8013. **Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

NY

Fill in the number of people in your household.

8

Fill in the median family income for your state and size of household.

13. \$ 170,191.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. **How do the lines compare?**

14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

RUTH ELIZABETH LITUMA VELIN
Signature of Debtor 1

Date _____

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Debtor 1 RUTH ELIZABETH LITUMA VELIN

Case number (if known) 8:25-bk-70092

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2024 to 12/31/2024.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employer: Amor Homecare INC

Constant income of \$3,440.40 per month.*

Debtor 1 RUTH ELIZABETH LITUMA VELINCase number (if known) 8:25-bk-70092***Paycheck Details:**

Amor Homecare INC

Date	Earnings	Overtime	Taxes	Other	Net Check
8/30/2024	752.00	0.00	156.80	25.96	569.24
8/23/2024	752.00	0.00	156.80	25.96	569.24
8/16/2024	752.00	0.00	156.80	25.96	569.24
8/9/2024	752.00	0.00	160.30	3.40	588.30
8/2/2024	752.00	0.00	160.30	3.40	588.30
7/26/2024	752.00	0.00	160.30	3.40	588.30
7/19/2024	780.20	79.90	185.34	3.81	670.95
7/12/2024	752.00	0.00	160.30	2.80	588.90
7/5/2024	752.00	0.00	160.30	3.40	588.30
9/6/2024	752.00	0.00	156.80	25.36	569.84
9/13/2024	752.00	0.00	156.80	25.96	569.24
9/20/2024	829.55	0.00	174.40	28.58	626.57
9/27/2024	752.00	0.00	156.80	25.96	569.24
10/18/2024	752.00	0.00	156.80	25.96	569.24
10/25/2024	752.00	0.00	156.80	25.36	569.84
11/1/2024	752.00	0.00	156.80	25.36	569.84
12/6/2024	752.00	0.00	156.80	25.36	569.84
12/7/2024	752.00	0.00	156.80	25.36	569.84
9/20/2024	829.55	0.00	174.40	28.58	626.57
10/4/2024	752.00	0.00	156.80	25.36	569.84
10/11/2024	752.00	0.00	156.80	25.96	569.24
11/8/2024	752.00	0.00	156.80	25.36	569.84
11/15/2024	752.00	0.00	156.80	25.36	569.84
11/22/2024	752.00	0.00	156.80	25.36	569.84
11/29/2024	752.00	0.00	156.80	25.36	569.84
12/13/2024	827.20	0.00	173.86	27.91	625.43
12/20/2024	752.00	0.00	156.80	25.36	569.84
Totals:	20,562.50	79.90	4,331.90	565.96	15,744.54

**United States Bankruptcy Court
Eastern District of New York**

In re RUTH ELIZABETH LITUMA VELIN

Debtor(s)

Case No. 8:25-bk-70092Chapter 7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: _____

RUTH ELIZABETH LITUMA VELIN
Signature of Debtor

Date: _____

Signature of Attorney
Roberto Pagan-Lopez 4978391
Pagan Lopez Law
28-07 Jackson Ave.
Tower Three Jackson, 5th Floor
Long Island City, NY 11101
(646) 216-8881 Fax: (646) 490-2159

Affirm, Inc.
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

Affirm, Inc.
Attn: Bankruptcy
650 California St
Fl 12
San Francisco, CA 94108-2716

Amex
PO Box 6789
Sioux Falls, SD 57117-6789

Amex
Correspondence/Bankruptcy
PO Box 981540
El Paso, TX 79998-1540

Bank of America
PO Box 982238
El Paso, TX 79998-2238

Bank of America
PO Box 45144
Jacksonville, FL 32232-5144

Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

Bank of America
PO Box 982238
El Paso, TX 79998-2238

Bank of America
PO Box 45144
Jacksonville, FL 32232-5144

Bank of America
Attn: Bankruptcy
4909 Savarese Cir
Tampa, FL 33634-2413

Bank of America
Attn: Bankruptcy NC4-105-03-14
PO Box 26012
Greensboro, NC 27420-6012

Citi Card/Best Buy
PO Box 6497
Sioux Falls, SD 57117-6497

Citi Card/Best Buy
Attn: Citicorp Cr Srvs Centralized Bankr
PO Box 790040
Saint Louis, MO 63179-0040

Citibank/the Home Depot
PO Box 6497
Sioux Falls, SD 57117-6497

Citibank/the Home Depot
Citicorp Cr Srvs/Centralized Bankruptcy
PO Box 790040
Saint Louis, MO 63179-0040

Comenity Bank/Victoria Secret
PO Box 182789
Columbus, OH 43218-2789

Comenity Bank/Victoria Secret
Attn: Bankruptcy
PO Box 182125
Columbus, OH 43218-2125

Faculty Practice Group EL
7901 Broadway, Room A1-9, Elmhurst
Elmhurst, NY 11373

Freedom Mortgage Corporation
11988 Exit 5 Pkwy
Bldg
Fishers, IN 46037-7939

Freedom Mortgage Corporation
Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

Freedom Mortgage Corporation
11988 Exit 5 Pkwy
Bldg
Fishers, IN 46037-7939

Freedom Mortgage Corporation
Attn: Bankruptcy
907 Pleasant Valley Ave
Ste 3
Mount Laurel, NJ 08054-1210

Long Island Integrative Health
Local 272 Welfare Foun, 220 East 23rd St
New York, NY 10010

Long Island Integrative Health
Local 272 Welfare Fund, 220 East 23rd St
New York, NY 10010

Macy's/ DSNB
PO Box 6789
Sioux Falls, SD 57117-6789

Macy's/ DSNB
Attn: Bankruptcy
701 E 60th St N
Sioux Falls, SD 57104-0432

Ney ordonez

NYC Health + Hospitals
50 Water St.
New York, NY 10004

Rocket mortgage
1050 Woodward ave
Detroit, MI 48226

Rocket Mortgage
1050 Woodward Ave
Detroit, MI 48226-3573

Rocket Mortgage
Attn: Bankruptcy
1050 Woodward Ave
Detroit, MI 48226-3573

Santander
Po box 660633
Dallas, TX 75266

Santander Bank NA
PO Box 12646
Reading, PA 19612-2646

Santander Consumer USA, Inc
PO Box 961211
Fort Worth, TX 76161-0211

Santander Consumer USA, Inc
Attn: Bankruptcy
PO Box 961245
Fort Worth, TX 76161-0244

Td Bank/Raymour & Flanigan
Columbia, SC 29202

Td Bank/Raymour & Flanigan
Attn: Bankruptcy
1701 Marlton Pike E
Cherry Hill, NJ 08003-2390

Wells Fargo Bank NA
PO Box 393
Minneapolis, MN 55480-0393

Wells Fargo Bank NA
Attn: Bankruptcy
1 Home Campus
MAC X2303-01A FL 3
Des Moines, IA 50328-0001

Wells Fargo Jewelry Advantage
PO Box 393
Minneapolis, MN 55480-0393

Wells Fargo Jewelry Advantage
Attn: Bankruptcy
PO Box 10438
Des Moines, IA 50306-0438

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORKIN RE: -----X
RUTH ELIZABETH LITUMA VELIN

Chapter 7

Case No.: 8:25-bk-70092

Debtor(s)
-----XSTATEMENT PURSUANT TO LOCAL RULE 2017

I, Roberto Pagan-Lopez 4978391, an attorney admitted to practice in this Court, state:

1. That I am the attorney for the above-named debtor(s) and am fully familiar with the facts herein.
2. That prior to the filing of the petition herein, my firm rendered the following services to the above-named debtor(s):

<u>Date\Time</u>	<u>Services</u>
11/08/2024 - 1 hour	Initial interview, analysis of financial condition, etc.
11/25/2024 - 1 hour	
12/10/2024 - 30 min	
12/19/2024 - 20 min	
12/30/2024 - 25 min	
01/10/2024 - 1 hour	Preparation and review of Bankruptcy petition

3. That my firm will also represent the debtor(s) at the first meeting of creditors.
4. That all services rendered prior to the filing of the petition herein were rendered by my firm.
5. That my usual rate of compensation of bankruptcy matters of this type is \$ 3,000.00.

Dated:

 Roberto Pagan-Lopez 4978391
 Attorney for debtor(s)
 Pagan Lopez Law
 28-07 Jackson Ave.
 Tower Three Jackson, 5th Floor

 Long Island City, NY 11101
 (646) 216-8881 Fax:(646) 490-2159
 rpagan@paganlopezlaw.com